

**STATE OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
BOARD OF REGISTERED NURSING MINUTES**

**DATE:** April 18, 2008

**TIME:** 9:00 am Both Days

**LOCATION:** Handlery Hotel  
950 Hotel Circle North  
San Diego, CA 92108

**PRESENT:** LaFrancine Tate, Public Member, President  
Susanne Phillips, MSN, RN, APRN-BC, FNP, Vice-President  
Andrea Guillen Dutton, Public Member (not present 4/18/08)  
Carmen Morales-Board, MSN, RNC, NP  
Elizabeth O. Dietz, Ed.D., RN, CS-NP  
Grace Corse, RN  
Janice Glaab, Public Member  
Nancy L. Beecham, RNC, BS

**NOT PRESENT:**

**ALSO PRESENT:** Ruth Ann Terry, MPH, RN, Executive Officer  
Heidi Goodman, Assistant Executive Officer  
Christina Sprigg, Manager, Licensee and Administrative Services  
Louisa Gomez, Manager, Licensing Standards & Evaluation;  
Millicent Lowery, Diversion/Probation Program  
Advanced Practice  
Louise Bailey, MEd, RN, Supervising NEC  
Miyo Minato, MN, RN, NEC  
Janette Wackerly, MBA, RN, NEC  
Geri Nibbs, RN, MN, NEC  
Carol Mackay, RN, NEC  
Alan Meth, Administrative Law Judge  
T. Michelle Laird Deputy Attorney General  
Spencer Walker, Deputy Director Board Relations  
Loretta West, Deputy Attorney General  
Norine Marks, DCA, Legal Counsel  
Kimberly Ott, Enforcement Program  
Eleanor Calhoun, Recorder

**Thursday, April 17, 2008**

**1.0 CALL TO ORDER**

L. Tate, Board President, called the meeting to order at 9:05 am and had the Board Members introduce themselves. The Board welcomed students from San Diego City College, Golden West College, and Mira Costa College.

## **2.0 DISCIPLINARY MATTERS**

The Board convened in closed session pursuant to Government Code Section 11126(c)(3) to deliberate on these matters and other disciplinary matters including stipulations and proposed decisions, and pursuant to Government Code Section 11126(e)(1, 2(A)) to confer with Legal Counsel regarding pending litigation.

HARTLAND, Lora Ann	GRANTED
JOHNSTON, John T.	GRANTED
LOPEZ, Scott David	MODIFICATION GRANTED/ EARLY TERMINATION DENIED
NDAWULA, Paul	GRANTED
PERRY, Timothy Allen.	GRANTED
ROUGHTEAN, Brian Donald	DENIED
SAMANDARI, Delshad	DENIED

### **Closed Session Discussion Items**

L. Tate, Board President, called the closed session meeting to order at 1:15 pm. The closed session adjourned at 2:15 pm.

### **Friday, April 18, 2008**

L. Tate, Board President, called the meeting to order at 9:05 am and had the board members introduce themselves.

## **3.0 OPEN FORUM**

Comment by G. Clavreaul

## **4.0 APPROVE/NOT APPROVE MINUTES OF February 21-22, 2008, Board Meeting**

MSC: Corse/Phillips that the Board approve minutes as corrected. 7/0/0

## **5.0 REPORT ON BOARD MEMBERS' ACTIVITIES**

## **6.0 EXECUTIVE OFFICERS' REPORT ON BOARD AND DEPARTMENT ACTIVITIES**

R. Terry presented this report

### **1.0 Board's Budget Update**

Budget Hearings - The Senate Budget Subcommittee #4 hearing was held on March 24, 2008. The Board's budget of \$24.2 million for FY 2008/2009 was approved by the Senate Subcommittee.

### **2.0 Department of Consumer Affairs (DCA) Updates**

Board Member Orientation – In accordance with Business and Professions Code Section 453, Board Members are required to attend DCA's Board Member Orientation within one year of their appointment. The next Board Member orientation is set for June 11, 2008, in Los Angeles

DCA Board and Bureau Conference- Board Members are requested to participate in the first Board and Bureau Conference on November 19-21, 2008. The Conference will focus on Regulatory Meetings, Board Development that includes Board Member Orientation, Strategic Planning, Unlicensed Activity and the Attorney General's office. Additional topics include: Consumer Issues and Policy and Consumer Trends.

DCA Appointments –Gerard Lobo has been appointed as the new Client Services Section Chief within the Office of Information Services (OIS). Gerard comes to us from the Alcohol and Drug Program and has held various leadership positions during his career, including assignments with the Department of General Services.

Spencer Walker has joined the Executive Office and is now the interim Senior Advisor to the Director. Additionally, he will be assisting with the board appointment process and is responsible for the Monthly Status Report that is required from every office.

Consumer Protection Activities – DCA hosted a series of informational booths at several shopping malls statewide to help promote Consumer Protection Week March 2-8, 2008 . Media events were held during the week to promote smart consumer practices.

### **3.0 Public Record Request**

The Board continues to comply with public record request and responds within the required timeframes that are set in the Government Code Section 6250. For the period of February 7, 2008 through April 1, 2008, the Board has received and processed 40 public record requests.

### **4.0 Board and Committee Packets Will Be On-Line**

Ten days prior to the June 12-13, 2008, Board Meeting the first Board packet will be available to download off of the Board's Web site. This new feature will allow anyone interested in an agenda item to view and print the information prior to the Board and Committee meetings. The August 21, 2008, Committee Meeting will be the first Committee packet that will be available to view and print on the Web site.

### **5.0 Personnel**

The following personnel changes have transpired since the last Board Meeting:

<i><b>New Hires</b></i>	<i><b>Classification</b></i>	<i><b>Board Program</b></i>
Miguel Marquez-Sanchez	Office Technician	Licensing
Anneli Wong	Mgmt Services Technician	Licensing
<i><b>Promotions</b></i>	<i><b>Classification</b></i>	<i><b>Board Program</b></i>
Natalie Weber	Key Data Operator	Licensee Support
Jody Curto	Assoc Info Systems Analyst	Administration
<i><b>Separations</b></i>	<i><b>Classification</b></i>	<i><b>Board Program</b></i>
Elliot Hochberg	Enforcement Program Mgr	Enforcement
Elizabeth Byers	Mgmt Services Technician	Enforcement

**The Board is participating with the Robert Wood Johnson Foundation,** the US Department of Labor, Employment & Training Administration, the Center to Champion Nursing in America (AARP), Department of Health & Human Services, and Health Resources & Services Administration, who will host a 2 day summit exploring strategies to increase nursing education capacity. The summit will focus on understanding strategies to expand nursing education capacity and fostering action at the state level around 4 issue areas: 1) Strategic Partnership in Resource Alignment; 2) The Role of Policy and Regulation; 3) Increasing Faculty Capacity and Diversity; 4) Education Redesign. Fifteen states will be selected with ten members each.

### **Revisions to Education Regulations**

The Board is planning to have two public forums on the revisions to education regulations, one in the north on May 13<sup>th</sup> and one in the south on May 15<sup>th</sup> at the California Endowment in LA.

## **7.0 REPORT OF THE ADMINISTRATIVE COMMITTEE**

L. Tate, Chairperson

### **7.1 Information Only: BRN Committee Appointments**

R. Terry presented this report

Board members were assigned to committees as follows:

#### **ADMINISTRATIVE COMMITTEE**

LaFrancine Tate, President

Susanne Phillips, MSN, RN, NP, Vice President

Ruth Ann Terry, MPH, RN, Executive Officer

#### **EDUCATION/LICENSING COMMITTEE**

Elizabeth O. Dietz, Ed.D., RN, CS-NP, Chair

Andrea Guillen Dutton, Med, ARRT

Carmen Morales-Board, MSN, RN, NP

Susanne Phillips, MSN, RN, NP

##### ***Staff Liaison***

Miyo Minato, MN, RN, NEC

#### **NURSING PRACTICE COMMITTEE**

Susanne Phillips, MSN, RN, NP, Chair

Carmen Morales-Board, MSN, RN, NP

Elizabeth O. Dietz, Ed.D., RN, CS-NP

Nancy L. Beecham, RNC, BS

##### ***Staff Liaison***

Janette Wackerly, MBA, RN, NEC

## **LEGISLATIVE COMMITTEE**

LaFrancine Tate, Chair

Grace Corse, RN

Janice Glaab

### ***Staff Liaison***

Louise Bailey, MEd, RN, Supervising NEC

## **DIVERSION/DISCIPLINE COMMITTEE**

Grace Corse, RN, Chair

LaFrancine Tate

Andrea Guillen Dutton, Med, ARRT

Nancy L. Beecham, RNC, BS

### ***Staff Liaisons***

Carol Stanford, Diversion/Probation Program Manager

## **8.0 REPORT OF THE LEGISLATIVE COMMITTEE**

L. Tate, Chairperson

### **8.1 Information Only: Adopt/Modify Positions on the following Bills, and any other Bills of Interest to the Board**

L. Bailey presented this report

AB 1916 Portantino: Community Colleges: faculty

MSC: Phillips/Dietz that the Board support AB 1916. 7/0/0

AB 2115 Mullin: Childhood lead screening

MSC: Phillips/Dietz that the Board oppose AB 2115 unless amended. 7/0/0

Comments by Trish Hunter ANA/C

AB 2398 Nakanishi: Cosmetic surgery: Employment of physicians and surgeons

MSC: Phillips/Dietz that the Board oppose AB 2398. 7/0/0

Comments by Trish Hunter ANA/C

SB 1454 Ridley-Thomas: Healing arts

MSC: Phillips/Dietz that the Board oppose SB 1454. 7/0/0

AB 2543 Berg: Geriatric and Gerontology Workforce Expansion Act

MSC: Morales-Board/Beecham that the Board oppose AB 2543. 7/0/0

SB 1288 Scott: California State University: Doctor or Nursing Practice degree

MSC: Phillips/Morales-Board that the Board support SB 1288. 7/0/0

Comments by D. Fox, CNA; T. Hunter, ANA/C; D. Moore CACN

SB 1487 Negrete McLeod: Emergency medical services: diabetes

Bill pulled by author prior to hearing

SB 1521 Cecillo: School nurse loan assumption program

MSC: Phillips/Dietz that the Board support SB 1521. 7/0/0

SB 1620 Ashburn: Community colleges: nursing faculty

MSC: Phillips/Dietz that the Board support SB 1620. 7/0/0

SB 1721 Yee: Health Facilities: direct care nurses

MSC: Dietz/Morales-Board that the Board support SB 1721. 6/0/1

Comments by Hedy Dumpel, CNA

SB 1779 Committee on Business, Professions and Economic Development  
Healing arts (Omnibus Bill)

MSC: Phillips/Morales-Board that the Board support SB 1779. 7/0/0

AB 1869 Anderson: State Board and Commissions reorganization  
Bill died

AB 2649 Ma: Medical Assistants: authorized services  
MSC: Dietz/Beecham that the Board support AB 2649. 7/0/0

SB 1393 Scott: Nursing Programs  
MSC: Phillips/Corse that the Board support SB 1393. 7/0/0

SB 1441 Ridley-Thomas: Healing Arts Practitioners: Alcohol and Drug Abuse  
MSC: Phillips/Dietz that the Board support SB 1441. 7/0/0

SB 1621 Ashburn: Nursing Education  
MSC: Phillips/Dietz that the Board support SB 1621. 7/0/0

SB 1585 Padilla: California Community Colleges transfer students  
No longer being followed

## **9.0 REPORT OF THE DIVERSION/DISCIPLINE COMMITTEE**

G. Corse, Chairperson

### **9.1 Information Only: Enforcement Program Update and Statistics**

H. Goodman presented this report

A copy of the Enforcement Program statistics for the first half of Fiscal Year 2007-2008 (July 2007 through February 2008) were provided for review.

Statistics continue to project that this fiscal year will have a higher number of pleadings filed than any of the five prior fiscal years. The number of disciplinary actions by default decision remains high, at 34.4% and it is noted that the majority of these default decisions are RNs that have California addresses. Every effort is made to ensure that all mailing addresses known to the Board are used to effect service of the decision. Total disciplinary actions are not increasing along with the increase in pleadings filed. However, the number of cases pending at the Attorney General's Office is the highest on record and the program will be setting up a meeting with the AG's office to discuss this issue.

Complaints received are near the highest levels seen in recent years. Based on current workload, the projected number is anticipated to increase, as well.

The Board will continue to monitor statistics, with special emphasis on the increasing caseload at the Attorney General's Office.

### **ENFORCEMENT PROGRAM UPDATE**

Elliot Hochberg has accepted a promotion with the Department of Aging and started his position on March 10, 2008. Elliot was with the board over 12 years and was a vital resource to his staff and management. His knowledge assisted the board in numerous ways including his participation in National Council Disciplinary Resource Advisory Panel, National Council Investigator/Attorney Workshop, Division of Investigation Investigator Workshop, and legislation proposals. Stacie Berumen will join us as the new Enforcement Program Manager on May 19, 2008.

Division of Investigation has enhanced their tracking system. They will be implementing a new case assignment tracking system known as CATS in the fall of 2008. This new system will permit the board to submit requests for service electronically. Staff will be able to monitor the status of the investigation online.

## **9.2 Information Only: Diversion Program Update and Statistics**

M. Lowry presented this report

### **Program Update**

The Diversion Program Manager and staff attended the Medical Board's Diversion Program Summit on January 21, 2008, since this program will sunset on July 1, 2008. On March 10<sup>th</sup> Ruth Ann Terry and the program manager were invited to participate in the Senate Business, and Professions and Economic Development Committee hearing on the Review of Physicians and Health Practitioners Substance Abuse Programs. The Committee was interested in how the Diversion Program is managed for the seven boards that have an outside contractor. Ms. Terry's presentation to the Committee outlined the functions and success of our program and emphasized the tools we have in place to ensure public protection.

### **Contract Update**

On February 22, 2008, the Board was notified of the intent to award the next Diversion Program contract to Maximus; however, this intent to award was rescinded as the cost proposal they submitted was unresponsive. The seven Boards met and finalized a new RFP that is to be released on or before March 15<sup>th</sup>. It is anticipated that the new intent to award will be posted during May, 2008, and it is anticipated that a new contract will be in place by July 1, 2008.

### **Diversion Evaluation Committees (DEC)**

There are currently six vacancies as follows: four physicians, and two registered nurses. Recruitment efforts continue.

### **Statistics**

A copy of the Monthly Statistical Summary Report for December and January was provided for review. As of January 31, 2008 there were 1289 successful completions in the Diversion Program.

## **9.3 Information Only: Probation Program Update and Statistics**

M. Lowry presented this report

### **Program Update**

### **Statistics**

Below are the current statistics for the Probation Program through February 29, 2008. The statistics for the Probation Program have been revised as they will now include the total number of probationers who have either surrendered their license or had their license revoked for the reporting period. Since July 1, 2005 through the current reporting period there have been 96 probationers who have surrendered their licenses or had their licenses revoked.

MALE	128
FEMALE	316
CHEMICAL DEPENDENCY CASES	239
PRACTICE CASES	140
SOUTHERN CALIFORNIA	219
NORTHERN CALIFORNIA	225
PENDING AT THE AG	76
ADVANCED CERTIFICATES	36
<b>TOTAL IN-STATE PROBATIONERS</b>	<b>444</b>

**9.4 (a) Approve/Not Approve: Diversion Evaluation Committee Member Appointment**

**(b) Information Only: Diversion Evaluation Committee Resignation**

**BACKGROUND:**

In accordance with Business and Professions Code Section 2770.2, the Board of Registered Nursing is responsible for appointing persons to serve on the Diversion Evaluation Committees (DEC). Each DEC is composed of three registered nurses, a physician and a public member with expertise in chemical dependency and/or mental health.

**a) APPOINTMENT**

Below is the name of the candidate who is being recommended for appointment to the DEC. If appointed, his term will expire June 30, 2012.

<b><u>NAME</u></b>	<b><u>TITLE</u></b>	<b><u>DEC</u></b>	<b><u>NO.</u></b>
Forrest Long	Nurse	Oakland	13

**b) RESIGNATION**

Below is the name of the Diversion Evaluation Committee member who has resigned for personal reasons.

<b><u>NAME</u></b>	<b><u>TITLE</u></b>	<b><u>DEC</u></b>	<b><u>NO.</u></b>
Virginia Robertson	Nurse	Palm Springs	6



The Board will continue recruiting efforts.

MSC: Dietz /Phillips that the Board approve the DEC member appointment and resignation. 7/0/0

## **10.0 REPORT OF THE EDUCATION/LICENSING COMMITTEE**

E. Dietz, Chairperson

### **10.1 Ratify Minor Curriculum Revisions**

M. Minato presented this report

According to Board policy, Nursing Education Consultants may approve minor curriculum changes that do not significantly alter philosophy, objectives, or content. Approvals must be reported to the Education/Licensing Committee and the Board.

Minor Curriculum revisions include the following categories:

- Curriculum changes
- Work Study programs
- Preceptor programs
- Public Health Nurse (PHN) certificate programs
- Progress reports that are not related to continuing approval
- Approved Nurse Practitioner program adding a category of specialization

The following programs have submitted minor curriculum revisions that have been approved

by the NECs:

- California State University Sacramento Baccalaureate Degree and Entry Level Master's Degree Nursing Programs
- California State University Stanislaus Baccalaureate Degree Nursing Program
- Dominican University of California Baccalaureate Degree Nursing Program
- Sonoma State University Entry Level Master's Degree Nursing Program
- American River College Associate Degree Nursing Program
- Butte College Associate Degree Nursing Program
- Chabot College Associate Degree Nursing Program
- Merced College Associate Degree Nursing Program
- Ohlone College Associate Degree Nursing Program
- Sacramento City College Associate Degree Nursing Program
- Shasta College Associate Degree Nursing Program
- Unitek College LVN to RN Associate Degree Nursing Program

#### **Progress Report:**

- American University of Health Sciences Baccalaureate Degree Nursing Program
- Azusa Pacific University Baccalaureate Degree Nursing Program

MSC: Morales-Board/Tate that the Board approve the minor curriculum revisions. 7/0/0

**10.2 a) Accept/Not Accept Feasibility Study for West Coast University, Los Angeles Campus, Baccalaureate Degree Nursing Program**

**b) Accept/Not Accept Feasibility Study for West Coast University, Orange County Campus, Baccalaureate Degree Program**

C. Mackay presented this report

Currently, WCU-LA and WCU-OC have BRN approved LVN to ADN programs. Each of these campuses function separately with their own nursing administration and nursing faculty, however they share a common curriculum, policies, etc.

Dr. Dianne Moore, founding Dean of Nursing at West Coast University, LA campus, is now Executive Dean of Nursing in the corporate office of West Coast University (WCU). Her responsibilities include new program development for WCU. Ms. Dianna Scherlin is the new Dean of Nursing at WCU, LA campus. Ms. Nancy Hoff is the new Dean of Nursing, WCU-OC campus.

West Coast University (WCU) is a private, for-profit, post-secondary educational institution. It is institutionally accredited by the Accrediting Council of Independent Colleges and Schools (ACICS), which is listed as a national accrediting agency by the US Department of Education. ACICS recently granted WCU renewed accreditation for eight years, and recognized WCU as one of eight schools in the nation to be placed on the Honor Roll for its outstanding performance. WCU also has institutional approval from the Bureau of Private Postsecondary and Vocational Education (BPPVE) pursuant to the California Education Code. WCU has approval from BPPVE to issue an ADN and BSN.

In July 2007, WCU submitted a Feasibility Study for a BSN program on both campuses. The Feasibility Study addresses the need for more baccalaureate prepared RNs, as well as documentation and data on the nursing shortage, health care needs, available clinical agencies, and RN programs and other programs offering health education in both geographic areas.

Initial funding for the BSN program(s) will come from WCU's sole shareholder until the programs are self-supporting. Revenues from WCU-LA may also be used to support the new program.

WCU is a member of the OC/Long Beach Consortium for clinical placements, and is a participant in establishing a clinical placement consortium in LA. WCU anticipates the availability of clinical placements at both locations. This is attributed to WCU's flexible theory and clinical scheduling, 12-hour shifts, and year round clinical rotations.

WCU plans to use the same BSN curriculum on both campuses. Pursuant to BRN approval, WCU-OC plans to admit 30 BSN students into general education courses 9/2008 (nursing courses 11/2009), while WCU-LA plans to admit BSN students to GE courses in 11/2009 (nursing courses 11/2010).

The Feasibility Study meets the BRN guidelines.

MSC: Morales-Board/Glaab that the Board accept the Feasibility Study for West Coast University, Los Angeles Campus, Baccalaureate Degree Nursing Program. 7/0/0

MSC: Morales-Board/Tate that the Board accept the Feasibility Study for West Coast University, Orange County Campus, Baccalaureate Degree Program. 7/0/0

**10.3 Accept/Not Accept Feasibility Study for West Coast University, Inland Empire Campus, Baccalaureate Degree Nursing Program**

M. Minato presented this report

West Coast University submitted a feasibility study for an LVN to RN program and a Generic BSN Program in the Inland Empire. This agenda item will be dealing exclusively with the BSN portion of the feasibility study.

West Coast University (WCU) is a private for profit, post secondary educational institution accredited by the Accrediting Council of Independent Colleges and Schools (ACICS).

WCU plans to host this program at the Ontario location as this site has ample space for student common areas, Science and Skills lab, classrooms, computer labs, faculty and administrative areas and parking. The nursing curriculum and all equipment and supplies will be comparable to the other sites at Los Angeles and Orange Counties. There are plans to have a Virtual Care Center by 2009.

There are 11 Associate Degree Nursing programs and three BSN programs located in the same surrounding area, many of which are currently having problems with clinical placement.

For this BSN program WCU is proposing to admit 30 students by September 2009 into the first 60 weeks of their pre-nursing classes. The first group of BSN students will enter their first Medical/Surg course February 2011. WCU intends to admit 30 BSN students every 20 week so that by February 2011 there will be a maximum of about 175 students needing clinical placement. The students will attend the clinical site only one day a week with rotations occurring every 10 weeks.

The BSN program will be 160 weeks all year around, slightly over three years. The curriculum will be the same as the one utilized at the Los Angeles and Orange counties.

R. Moore, Executive Dean made presentation about the Virtual Care Center.

MSC: Glaab/Phillips that the Board Accept Feasibility Study for West Coast University, Inland Empire Campus, Baccalaureate Degree Nursing Program. 7/0/0

**10.4 Accept/Not Accept Feasibility Study for Concord Career College North Hollywood (CCCNH) Generic Associate Degree Nursing Program**

M. Minato presented this report

Deferred

MSC: Glaab/Phillips that the Board defer Feasibility Study for Concord Career College North Hollywood (CCCNH) Generic Associate Degree Nursing Program. 7/0/0

**10.5 Accept/Not Accept Feasibility Study for Institute of Medical Education, LVN to RN Associate Degree Nursing Program**

M. Minato presented this report

Deferred

MSC: Phillips/ Beecham that the Board defer Feasibility Study for Institute of Medical Education, LVN to RN Associate Degree Nursing Program. 7/0/0

**10.6 Accept/Not Accept Feasibility Study for Madera Community College Center, Associate Degree Nursing Program**

M. Minato presented this report

The Madera Community College Center is a two year public and comprehensive institution that offers educational programs in adult basic education vocational, liberal arts and pre-professional courses. The Madera Community College center has been in existence for 20 years initially operating at the Madera Unified School District High School. In August 1996 the State Center Community College District opened a dedicated site for the Madera Community College Center situated on 114 acres. The Madera campus has 26,000 square feet student services and administrative building that houses the library, open computer lab, counseling, tutorial services and classrooms offices and a large lecture hall.

In 2004 an Academic Village Complex was built that includes smart classrooms and offices as well as state of the art laboratory space for biology, physical sciences, chemistry, computer studies, business, art, and a Licensed Vocational Nursing Program.

The Madera Community College Center is a “majority minority” service area in which the major ethnic group is Hispanic and this population is also increasing in campus enrollment. It is anticipated that Madera is one of the fastest growing population centers in the Central Valley and the Madera Community Center will therefore continue with its expansion and student growth.

There are six other programs in the area: CSU Bakersfield; Bakersfield College; College of the Sequoias, Fresno City College, CSU Fresno and Merced City College. Many of these colleges are 50 -100 miles from the Madera Community College Center area.

The proposed program is for the development of a one-year, two semesters Associate Degree LVN-RN program at the Madera Community College Center located in Madera. The description of the program as submitted will need to be revised. The target date for admitting the first cohort of 12 students is Fall 2008. Each subsequent Fall 12 students will be enrolled. This estimate is based on hospital support in terms of clinical placement, documented need for additional nurses and the career ladder for current and future Madera Community College Center LVN graduates. It is not clear how and where qualified faculty will be recruited for this proposed program

The Madera Community College Center is funded by property taxes and state apportionment. The proposed program will be sustained and maintained by internal funds and will be augmented by external sources such as the college fund budget generated by FTES and VTEA funds. Other external funds will be secure such as state and grants.

MSC: Glaab/Morales-Board that the Board accept Feasibility Study for Madera Community College Center, Associate Degree Nursing Program. 7/0/0

**10.7 Accept/Not Accept Feasibility Study for Shepherd University, LVN to RN Associate Degree Nursing Program**

M. Minato presented this report

Deferred

MSC: Corse/Morales -Board that the Board defer Feasibility Study for Shepherd University, LVN to RN Associate Degree Nursing Program. 7/0/0

**10.8 a) Grant/Not Grant Initial Approval of West Coast University, Los Angeles Campus, Baccalaureate Degree Nursing Program**

**b) Grant/Not Grant Initial Approval of West Coast University, Orange County Campus, Baccalaureate Degree Nursing Program**

C. Mackay presented this report

Currently, WCU-LA and WCU-OC have BRN approved LVN to ADN programs. Each of these campuses function separately with their own nursing administration and nursing faculty, however they share a common curriculum, policies, etc.

Dr. Dianne Moore, founding Dean of Nursing at West Coast University-LA, is now Executive Dean of Nursing in the corporate office of West Coast University (WCU). Her responsibilities include new program development for WCU. Ms. Dianna Scherlin is the new Dean of Nursing at WCU-LA. Ms. Nancy Hoff is the new Dean of Nursing at WCU-OC.

In April 2005, the BRN initially approved an LVN to RN Associate Degree Nursing Program at WCU-LA. On June 8, 2008, the Board accepted a Feasibility Study, and approved a new LVN to RN Associate Degree Nursing Program at WCU-OC.

While these nursing programs are part of the same corporate structure and share a common curriculum, policies, evaluation plan etc., they are two separate nursing programs with different nursing administrative teams and faculty.

In July 2007, the BRN received an updated Feasibility Study for a Baccalaureate Degree Nursing Program at WCU-LA and WCU-OC. In the beginning of February 2008, the BRN received a revised Self Study for a Baccalaureate Degree Nursing (BSN) Program at WCU-LA and WCU-OC. If the proposed curriculum is approved, the existing LVN to RN program will become a track in the BSN curriculum.

Carol Mackay, NEC, and Miyo Minato, NEC, conducted an initial approval visit for the BSN program at WCU-OC on February 27, 2008, and WCU-LA on February 28, 2008. The proposed programs are in compliance with the Board's rules and regulations. No recommendations were made.

If approved, WCU-OC is positioned to admit 30 BSN students to the first nursing course in November 2009 (pre-requisites in September 2008), while WCU-LA plans to admit 30 BSN students in November 2010 (pre-requisites in November 2009). The anticipated admission cycle on both campuses will then be 30 BSN students every 20 weeks.

Existing faculty, in the LVN to ADN program and the RN to BSN completion program, will be teaching in the new BSN curriculum. Additional full-time and adjunct faculty will be recruited as needed. WCU-OC is currently interviewing candidates for its Associate Dean position. The Associate Dean for WCU-LA has been in place since January 2007.

WCU's proposed BSN curriculum reflects AACN's Essentials of Baccalaureate Education document. WCU intends to keep the nursing program elements (philosophy, program objectives, policies and procedures, evaluation plan, curriculum etc.) the same on both campuses. The pre-licensure component of the proposed BSN program consists of 49 semester units in the art and science of nursing (31 theory and 18 clinical), 9 units in communication, and 27 units in science for a total of 85 units required for licensure. An additional 40 units are required for the BSN degree, for a total degree requirement of 125 semester units.

A full complement of student services, such as admissions, financial aid, library and computer lab, is provided on both campuses. The computer software programs, skills lab equipment, library holdings have been expanded to meet the learning needs of BSN students.

WCU is a member of the Orange County/Long Beach Consortium for clinical placements, and is participating in the establishment of the LA Consortium for clinical placements. WCU has numerous clinical contracts in place in Orange County and LA. Based on current utilization of clinical placements, WCU was able to demonstrate availability of clinical placements for the additional BSN students without displacing other nursing programs.

Budget projections were prepared based on full enrollment in the BSN program and the LVN to ADN track. Funds are sufficient to support the program expansion.

WCU-OC is located in Anaheim, CA. WCU purchased and renovated the building last year. The renovation included state-of-art classrooms, science and skills lab, student study space, faculty offices, and other administrative offices necessary to operate the program.

A major renovation is in progress for WCU-LA that includes a state-of-art classroom, science and skills lab for the BSN students. In addition by 2009, WCU plans to have its own dedicated building and space.

Pursuant to Board approval, site visits will be scheduled on both campuses in accord with the BRN initial approval process. Submission of completed course syllabi will also be scheduled.

MSC: Phillips/Glaab that the Board Grant Initial Approval of West Coast University, Los Angeles Campus, Baccalaureate Degree Nursing Program. 7/0/0

MSC: Phillips/Glaab that the Board Grant Initial Approval of West Coast University, Orange County Campus, Baccalaureate Degree Nursing Program. 7/0/0

#### **10.9 Grant/Not Grant Initial Approval for Everest College Associate Degree Nursing Program**

M. Minato presented this report

Everest College (EC) is a member of the Corinthian Colleges, Inc. (CCI) educational system. This for profit institution was originally established in Rancho Cucamonga, CA in 2001. In May 2006 the college relocated to a newly constructed campus located in Ontario, CA.

The college is accredited by the Accrediting Council of Independent Colleges and Schools (ACICS) and was awarded accreditation for Bachelor's degrees in 2006. EC currently offers Bachelor degrees in Administrative Management, Business, and Criminal Justice. In addition, the college offers Associate of Science degrees in Accounting, Business, Criminal Justice and Paralegal. Since the first graduating class in 2002, nearly 950 graduates have earned their degrees at EC. EC is working to achieve regional accreditation in 2008, which will allow students to continue on with their professional education.

This Board accepted EC's feasibility study at the September 21, 2007 Board meeting. On February 13, 2008, M. Minato, NEC, conducted an initial approval visit of the Everest College generic ADN Program.

The philosophy of EC is dedicated to the ideal that every student should have the encouragement and opportunity to develop to his or her full potential. The college has in place support systems, such as the Director of Student Services, who tracks students during the program to identify factors and provide interventions to keep students in the program. All students participate in the Student Success Program,

which is part of the curriculum to encourage and ensure students achieve their goals.

The new campus building has dedicated nursing classrooms, lab spaces, and faculty offices. Additional classrooms, conference rooms, and PC labs are available on the second floor. Plans for hiring faculty are in place. The faculty to student ratio in the clinical area will be less than the usual 1: 10, likely be 1:7. There is a plan to hire a lab coordinator and including simulation in the curriculum in the future.

The curriculum framework is based on core competencies of the NLNAC and the four categories of client needs from the NCSBN. The five concepts used in EC's curriculum framework are Nursing Process, Critical Thinking, Communication, Health Promotion, and Professional Roles. Cultural diversity and care throughout the life span are other key concepts. Curriculum is organized and developed to progress from simple to complex, building on students' prior education and experiences.

The program consists of seven, 12-week quarters and covers 21 months. The proposed curriculum meets the Board rules and regulations. Content required for licensure totals to 107 quarter units: Nursing – 61 (33 theory; 28 clinical); Sciences 32 – units (6 Anatomy; 6 Physiology; 6 Microbiology; 2 Nutrition; 4 Sociology; 4 Psychology; 4 Math); Communications – 14 (8 English; 4 Computer Application; 2 Therapeutic Communications). A total of 115 quarter units are required for ADN.

The program plans to admit 30 students in the summer. Discussed with Campus Director the need for the Board to ensure clinical placement and faculty to supervise the proposed number of students. The NEC will make a visit in one year following initial start of the program (July 2009) and at the time students are ready to graduate (March 2010).

MSC: Phillips/Beecham that the Board Grant Initial Approval for Everest College Associate Degree Nursing Program. 7/0/0

#### **10.10 Grant/Not Grant Initial Approval for Mission College LVN-RN Associate Degree Nursing Program**

J. Wackerly presented this report

Susan B. Carreon, Ph.D., MN, RN has served as the Director of the LVN-RN program starting August 2007.

The Board accepted the feasibility study for a LVN-RN program from Mission College on November 2007.

Janette Wackerly, NEC conducted an initial approval visit for the proposed program on February 6, 2008. The Director has been working with Cynthia Harrison MS, RN who meets requirements for instructor, medical surgical content expert, and upon approval of the Mission College LVN-RN program. Ms Harrison will be the assistant director. There were no areas of non-compliance. The program was given two recommendations.



Mission College is a public community college located within the city of Santa Clara and serves Santa Clara County.

Mission College currently has a Health Occupation programs in Certified Nursing Assistant, Psychiatric Technician and Licensed Vocational Nurse. Since 1966, the Vocational Nursing Program has graduated over 1,000 Vocational Nurses. For several years anecdotal information from VN graduates has indicated a desire to have the opportunity to further their education and become RNs. Recently this need has become more acute as acute care hospitals in this area have stopped hiring LVNs and are moving toward an all RN nursing staff.

In 2006 the college was successful in obtaining a \$500, 000 start-up grant through the Chancellor's office California Community Colleges (COCCC). This grant helped fund the development of new LVN to RN program office space, a "Smart classroom/Simulation lab, development of the curriculum, program policies and Feasibility Study.

The curriculum for the Mission College LVN to RN program is based on an adaptation of the ADN Curriculum Model, developed by ADN faculty from around the state in 2006, via a grant from the COCCC. The curriculum model will be actualized by the newly hired faculty following board approval of the Mission College LVN-RN program.

MSC: Phillips/Beecham that the Board Grant Initial Approval for Mission College LVN-RN Associate Degree Nursing Program. 7/0/0

- 10.11 Approve/Not Approve California RN Program in Partnership with Out of State Online Program: San Diego State University Baccalaureate Degree Nursing Program in Partnership with University of Oklahoma Health Science Center, Online Accelerated Baccalaureate Degree Nursing Program**  
C. Mackay Presented this report

Deferred

MSC: Corse/Phillips that the Board defer approval of California RN Program in Partnership with Out of State Online Program: San Diego State University Baccalaureate Degree Nursing Program in Partnership with University of Oklahoma Health Science Center, Online Accelerated Baccalaureate Degree Nursing Program. 7/0/0

- 10.12 Approve/Not Approve Proposed Amendments to Title 16, C.C.R., division 14, Article 3, Sections 1421, 1422, and 1423, Schools of Nursing regulations**  
M. Minato presented this report

At the ELC meeting on January 17, 2008, information on amendments and proposed new regulations to Title 16, Division 14, Article 3, Schools of Nursing were introduced to the Education/Licensing Committee.

These changes involved amendments and additions of new sections CCR Sections 1420 to 1430, such as Advanced Placement for Previous Health Care Education or Experience, NCLEX-RN Pass Rate Standard, Preceptorial Learning Activities, and Types of Approvals. Input on proposed changes was obtained from prelicensure registered nursing program Chairs/Deans at their Annual Meeting in October 2007. The Board's legal counsel is working closely with these proposed amendments to the regulations. The goal is to bring to the Board all proposed changes and new regulations to the next Board meeting.

At the March 17<sup>th</sup> meeting, the ELC considered proposed changes to CCR Sections 1421, 1422, and 1423 and related documents referenced. The committee recommended approval with the understanding that non-substantive changes may be made to the proposed language following legal counsel's review.

MSC: Glaab/Tate that the Board Approve, with technical changes made by staff, Proposed Amendments to Title 16, C.C.R., division 14, Article 3, Sections 1421, 1422, and 1423, Schools of Nursing regulations. 7/0/0

### **10.13 Information Only: 2006-2007 Regional Annual School Reports**

C. Mackay presented this report

The Regional Annual School Reports present the historical analyses of nursing program data from the 2000-2001 BRN Annual School Survey through the 2006-2007 survey for the nine economic regions in California. Each region has a separate report. All data are presented in aggregate form, and describe the overall trends in these regions over the specified periods. The data items addressed include the numbers of nursing programs, enrollments, completions, retention rates, student and faculty census information, and simulation centers.

The nine regions include: (1) Northern California, (2) Northern Sacramento Valley, (3) Greater Sacramento, (4) Bay Area, (5) San Joaquin Valley, (7) Central Coast, (8) Southern California I (Los Angeles and Ventura Counties), (9) Southern California II (Orange, Riverside, and San Bernardino Counties), and (10) Southern Border Region. Counties within each region are detailed in the corresponding report. The Central Sierra (Region 6) does not have any nursing programs and was, therefore, not included in the analyses.

Reports will be available to the public on the BRN website (<http://www.rn.ca.gov/>).

### **10.14 NCLEX Pass Rate Update**

M. Minato presented this report

The Board of Registered Nursing receives quarterly reports from the National Council of State Boards of Nursing (NCSBN) about the NCLEX-RN test results by quarter and with an annual perspective. The following tables show this information for 12 months and by each quarter.

**NCLEX RESULTS – FIRST TIME CANDIDATES**  
**January 1, 2008 – March 31, 2008**

<b>JURISDICTION</b>	<b>TOTAL TAKING TEST</b>	<b>PERCENT PASSED %</b>
California	8,939	85.75
United States and Territories	122,111	85.05

<i>04/01/07 – 06/30/07</i>		<i>07/01/0 – 09/30/07</i>		<i>10/01/07 – 12/31/07</i>		<i>01/01/07 – 12/31/07</i>		<i>01/01/08 – 03/31/08</i>	
# cand.	% pass	# cand.	% pass	# cand.	% pass	# cand.	% pass	# cand.	% pass
1,638	87.36	3,588	84.06	682	75.37	3,031	89.21	8,939	85.75

\*Includes (6), (13), (9) & (4) “re-entry” candidates

Revised NCLEX-RN Test Plan implemented and passing standard increased to -0.21 logits 4/1/07.

The Nursing Education Consultants monitor the NCLEX results of their assigned programs. Current procedure provides that after each academic year, if there is substandard performance (below 70% pass rate for first time candidates), the NEC requests that the program director submit a report outlining the program's action plan to address this substandard performance. Should this substandard performance continue in the second academic year, an interim visit is scheduled and a written report is submitted to the Education/Licensing Committee. If there is no improvement in the next quarter, a full approval visit is scheduled within six months. A report is made to the Education /Licensing Committee following the full approval visit.

The Board will continue to monitor results.

#### **11.0 Report of the Nursing Practice Committee**

S. Phillips, Chairperson

#### **11.1 Approve/Not Approve: Nursing Practice Committee Goals and Objectives 2008-2009**

J. Wackerly presented this report

#### **Goal 1.**

**In support of the consumer's right to quality care, identify and evaluate issues related to registered nursing tasks being performed by unlicensed assistive personnel.**

- 1.1 Take an active role in activities conducted by other agencies and organizations related to unlicensed assistive personnel.*
- 1.2 Disseminate orally and in writing, the Board's position on the use of unlicensed assistive personnel and/or regulations once accepted.*

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## **Goal 2.**

**Promote patient/resident safety as an essential and vital component of quality nursing care.**

- 2.1 *Engage and dialogue with recognized national experts in supporting patient safety in what individuals and organizations have done and what remains to be done. For example just culture and root cause analysis, failure mode and effect analysis, human factor and systems factor.*
  - 2.2 *Monitor patient/resident safety activities as a component of quality nursing care such as health care errors, competency, patient outcomes, stakeholders, nursing shortage, ethics, lifelong learning, nursing standards, licensure, safety legislation, magnet hospitals.*
- 

## **Goal 3.**

**Develop and implement processes for the Board to interact with stakeholders to identify current trends and issues in nursing practice and the health care delivery system.**

- 3.1 *Actively participate with other public and private organizations and agencies involved with health care to identify common issues and to promote RN scope of practice consistent with the Nursing Practice Act and ensuring consumer safety.*
  - 3.2 *As nursing practice issues arise, convene BRN focus groups of RNs for input in shaping Board policy.*
  - 3.3 *Research, monitor, and evaluate the newly developing nursing practice arena of telenursing and disease state management, including the relationship with telehealth and telemedicine and to coordinate with public and private agencies dealing with these issues.*
  - 3.4 *Promote technology awareness and technology innovations in the healthcare delivery systems such as computerization medical and nursing data as relates to nursing care delivery and quality patient care.*
- 

## **Goal 4.**

**Identify and implement strategies to impact identified trends and issues.**

- 4.1 *Provide timely written and/or verbal input on proposed regulations related to health care policies affecting nursing care.*

- 4.2 *Collaborate with the Education/Licensing Committee on educational issues/trends and the Legislative Committee on legislation pertaining to nursing practice.*
- 4.3 *Review and revise current BRN advisory statements and recommend new advisory statements as needed to clarify standards of nursing practice.*
- 

### **Goal 5.**

**Develop and implement processes for the Board to interact with stakeholders to identify and evaluate issues related to advanced practice nursing and to promote maximum utilization of advanced practice nursing.**

- 5.1 *Support and promote full utilization of advanced practice nurses.*
- 5.2 *Monitor trends and growing opportunities for advanced practice nursing in areas of health promotion, prevention and managing patients through the continuum of care.*
- 5.3 *Actively participate with organizations and agencies focusing on advanced practice nursing.*
- 5.4 *In collaboration with the Education/Licensing Committee remain actively involved in facilitating communication and work in progress for education/certification function and communication with advanced practice educational program directors, professional organizations, state agencies and other groups.*

MSC: Corse/Morales-Board that the Board Approve Nursing Practice Committee Goals and Objectives 2008-2009. 7/0/0

### **11.2 Information Only:**

**(a) California HealthCare Foundation, January 2008: Scope of Practice Laws in Health Care: Rethinking the Role of Nurse Practitioners**

**(b) The Center for the Health Professions, UCSF, 2007, Overview of Nurse Practitioner Scopes in the United States-Discussion**

J. Wackerly presented this report

**(a) Scope of Practice Laws in Health Care: Rethinking the Role of Nurse Practitioners.**

Key Findings of the Survey:

- NPs are registered nurses with advanced clinical training. They serve as primary care providers in a broad range of acute and outpatient settings, such as pediatrics, internal medicine, anesthetics, geriatrics, and obstetrics
- NPs began to practice in the 1960's, in response to a nationwide physician shortage. Today, there are an estimated 145,000 NPs nationwide, and 13,649 in California.

- The 50 states and the District of Columbia have individual control over the laws that govern NP scope of practice. This has resulted in wide state-by-state differences in the types of services that NPs can deliver to their patients.
- These differences in scope of practice may slow the uniform expansion of NP services, prohibit NPs from providing the care for which they are trained, and hampered the use of NPs in improving access and controlling health care costs.
- California is roughly in the middle, nationwide, in NP practice autonomy and independence. NPs must collaborate with physicians and develop joint, written protocols that cover all major elements of the NP practice.
- California NPs may diagnose, order tests and durable medical equipment, refer patients, and “furnish” or “order” drugs, but only according to that protocol. There is a cap of four drug prescribing NPs per physician.
- Six states---Alaska, Arizona, New Hampshire, New Mexico, Oregon, and Washington---have NP scopes of practice that are among the nations most expansive. In these states, NPs practice autonomously, with not physician oversight, and prescribe drugs without physician involvement.

The conclusion of this report:

Today there is a great deal of discussion in health policy circles, in California and across the country, of an impending physician shortage. In many ways, this current debate mirrors the events of the 1960’s which spawned the initial development of the nurse practitioner.

Despite wide state-by-state differences in practice authorities, NPs deliver comprehensive medical services in a variety of settings and specialties, which are largely comparable to those provided by physicians, both in scope and medical outcomes.

The reappearance of the physician shortage issue suggests that the efficiency, accessibility, and quality of the health care system could benefit from the increased inter-professional collaboration, and be revised models for delivery of medical services that employ uniform, shared scopes of practice among providers

And with California possibly poised to overhaul its system of health care coverage, a review of the nurse practitioner’s role in that system may become a part of the plan.

California Health Care Foundation, January 2008

**(b) The Center for the Health Professions, UCSF. Overview of NP Scopes of Practice in the US - Discussion. Executive Summary**

Nurse Practitioners (NPs) are registered nurses who are prepared beyond initial nursing education in a NP program to provide primary care directly to patients. The profession originated in the mid-1960s in response to shortage of physicians (MDs). NP education requirements, certification mechanisms and legal scopes of practice are decided at the state level and vary considerably.

NP scopes of practice vary widely among the states:

- Eleven states permit NPs to practice independently, without physician involvement
- Twenty-seven permit NPs to practice in collaboration with an MD. Collaboration definitions vary, but written practice protocols are often required
- Ten states require MD supervision of NPs
- NPs in all states may prescribe, but MD involvement is generally required to varying degrees. Additional limitations such as 72-hour or 30-day supplies may apply.
- Specific practice authorities are sometimes articulated although states may require MD involvement for any task: 44 states explicitly authorize NPs to diagnose (sometimes limited to a nursing diagnosis); 33 states explicitly authorize NPs to refer; and 20 states explicitly authorize NPs to order tests.

Education and certification requirements vary:

- Forty-two states require national certification as part of NP licensure.
- Just over half of the states require NPs to be prepared with a master's degree, while some states only require completion of a few months of post-RN education.

Implications of current policy:

- Preventing professionals from practicing to the full extent of their competence negatively affects health care costs, access and quality.
- NP practices are impeded by scope of practice laws, financing and reimbursement mechanisms, malpractice insurance policies and outdated practice models.
- The professions and the public are ill-served when practice authorities differ dramatically among states.

Policy options to consider:

- Continue trend to expand NP scope of practice to match competence.
- Adopt uniform scope of practice laws to reduce variability among states
- Increase number of NP programs to reflect growing demand for primary care

UCSF Center for the Health Professions, 2007: Sharon Christian, JD, Catherine Dower, JD and Ed O'Neil, PhD, MPA, FAAN.

### **11.3 Information Only: Center for American Nurses Calls For an End to Lateral Violence and Bullying in Nursing Work Environments – New position statement offers information and recommended strategies**

J. Wackerly presented this report

#### **Statement of Position**

Lateral violence and bullying has been extensively reported and documented among healthcare professionals with serious, negative outcomes for registered nurses, their patients, and health care employers. These disruptive behaviors are toxic to the nursing profession and have a negative impact on retention of quality staff.

Horizontal violence and bullying should never be considered normally related to socialization in nursing nor accepted in professional relationships. It is the position of the CENTER for American Nurses (The CENTER) that there is no place in a professional practice environment for lateral violence and bullying among nurses or between healthcare professionals. All healthcare organizations should implement a zero tolerance policy related to disruptive behavior, including a professional code of conduct and educational and behavioral interventions to assist nurses in addressing disruptive behavior. (Approved February 2008)

The CENTER in its statement defines bullying and lateral violence, disruptive behavior, culture of safety, workplace bullying and verbal abuse.

The CENTER adopted position statement which includes recommended strategies that nurses, employers/organizations, continuing education and academic programs and nursing researchers can employ to eliminate lateral violence and bullying.

The Center for American Nurses is a national professional nursing organization that educates, equips, and empowers nurses to advocate for themselves, their profession, and their patients. The Center offers evidence-based solutions and powerful tools to navigate workplace challenges, optimize patient outcomes, and maximize career benefits. Established in 2003, The Center partners with its 42 organization members, comprised of over 47,000 registered nurses nationwide, to develop resources, strategies, and tools to help nurses manage evolving workforce issues and succeed in their careers. Additional information about the Center can be found at [www.centerforamericannurses.org](http://www.centerforamericannurses.org).


**11.4    Removed from agenda.**

**12.0    Public Forum**

Comment by G. Clavreaul

Meeting Adjourned at 12:40 p.m.

  
Ruth Ann Terry, MPH, RN  
Executive Officer

  
LaFrancine Tate  
President